## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Stop Hillary PAC	C C00544767
	M M / D D / Y Y Y Y Y
Check if 24-hour report 48-hour report New report Amends report filed	
Full Name of Payee CD, INC.	Date of Public Distribution/Dissemination
	10 21 2015
Mailing Address P.O. BOX 1877	Amount
City State Zip Code	10000.00
ALEXANDRIA VA 22313	Transaction ID : SE24.11700 Date of Disbursement or Obligation
Purpose of Expenditure CAREY ACCOUNT - DIGITAL AD BUY; SEE MEMO TEXT  Category/ Type  004	10 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
HILLARY RODHAM CLINTON Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disbut 23200.00  Disbut 2016	rrsement For: Primary General  Other (specify) ▶ Dem. Nat. Convention
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
	Date of Dishuragment or Obligation
Purpose of Expenditure  Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General  Other (specify) ▶
<del>-</del>	
(a) SUBTOTAL of Itemized Independent Expenditures	10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
	0 20 2015
Signature	